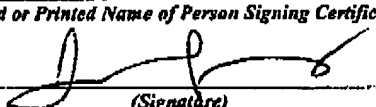



CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 01-0296
Applicant(s): Thomas L. Andrews et al.			
Application No. 10/781,162	Filing Date February 18, 2004	Examiner Jerry T. Rhall	Group Art Unit 2874
Invention: FIBER OPTIC DAMAGE DETECTION SYSTEM FOR COMPOSITE PRESSURE VESSELS			
RECEIVED CENTRAL FAX CENTER SEP 26 2005			
I hereby certify that this <u>Amendment Transmittal Letter</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571-273-8300</u>) on <u>September 26, 2005</u> (Date)			
<u>Carrie Anne Cheung</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)			
Note: Each paper must have its own certificate of mailing.			

SEP 26 2005

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 01-0296	
Applicant(s): Thomas L. Andrews et al.						
Application No. 10/781,162	Filing Date February 18, 2004	Examiner Jerry T. Rhall	Customer No. 22145	Group Art Unit 2874	Confirmation No.	
Invention: FIBER OPTIC DAMAGE DETECTION SYSTEM FOR COMPOSITE PRESSURE VESSELS						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	18	20	0	x \$50.00	\$0.00	
INDEP. CLAIMS	5	3	2	x \$200.00	\$400.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$400.00	
<input type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 11-1159 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 _____ <i>Signature</i>			Dated: September 26, 2005			
Tejinder Singh (Reg. No. 39,535) Klein, O'Neill & Singh, LLP (Customer No. 22145) 2 Park Plaza, Suite 510 Irvine, California 92614 Tel: (949) 955-1920 Fax: (949) 955-1921 Email: tj Singh@koslaw.com			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence			
CC:						

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:
Andrews, Thomas L. et al.

Serial No.: 10/781,162

Filed: February 18, 2004

For: Fiber Optic Damage Detection System
for Composite Pressure Vessels

Group Art Unit: 2874

Examiner: Jerry T. Rhall

AMENDMENT AND RESPONSE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is in response to the Office Action mailed June 28, 2005. Please consider the following remarks regarding the subject application.

Amendment to the Abstract begins on Page 2;

Amendment to Claims begin on Page 3; and

Remarks begin on Page 7.

09/27/2005 MBINAS 00000028 10781162

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